

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. <u>10647330</u>	FILING DATE					
						APPLICANT(S)						
CLAIMS												
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		IND	DEP	IND	DEP	IND	DEP
	IND	DEP	IND	DEP	IND	DEP						
1	1						51					
2	1						52					
3	1						53					
4	3						54					
5	0						55					
6	0						56					
7	0						57					
8	0						58					
9	0						59					
10	0						60					
11	0						61					
12	0						62					
13	0						63					
14	0						64					
15	0						65					
16	0						66					
17	0						67					
18	0						68					
19	0						69					
20	0						70					
21	0						71					
22							72					
23							73					
24							74					
25							75					
26							76					
27							77					
28							78					
29							79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	1						TOTAL IND.					
TOTAL DEP.	22	↔		↔		↔	TOTAL DEP.	↔	↔	↔		
TOTAL CLAIMS	23	████████		████████		████████	TOTAL CLAIMS	████████	████████	████████	████████	